

Electronic Patent Application Fee Transmittal**Application Number:**

10523605

Filing Date:

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Title of Invention:

Antiaging composition

First Named Inventor/Applicant Name:

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Attorney Docket Number:

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USD(\$)****Basic Filing:****Pages:****Claims:****Miscellaneous-Filing:****Petition:****Patent-Appeals-and-Interference:****Post-Allowance-and-Post-Issuance:****Extension-of-Time:**

Extension - 3 months with \$0 paid

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Description	Fee Code	Quantity	Amount	Sub-Total in USD(\$)
Miscellaneous:				
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